

MONTANA STATE PRISON POLICIES AND PROCEDURES

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Section 7: Emergency Response Procedures		Revision Date:
Signature: /s/ Mike Mahoney		Effective Date: 01-31-03

I. POLICY:

All employees exposed to critical job-related incidents or crisis events shall be provided assistance through Post Trauma Response.

II. IMPLEMENTATION:

This policy was formerly 3.2.6, Emergency Staff Services. It was renumbered on the effective date above.

III. AUTHORITY:

2-15-112, MCA, Duties and Powers of Department Heads 53-1-203, MCA, Powers and Duties of Department of Corrections DOC 3.7.8 Post Trauma Response

IV. **DEFINITIONS**:

<u>Critical Incident</u> is any situation that may cause participants and/or witnesses to experience unusually strong physical, psychological or emotional responses, having the potential to impair ability to function, either at the incident or later. Critical incidents include but are not limited to: death, serious injury or accident, discharge of a firearm/shooting, hostage taking, major disturbance/riot, serious offender provocation, suicide attempt, assault, sexual assault/rape, natural disasters, blood/body fluid exposure, executions, or a use of deadly force.

<u>Critical Incident Furlough</u> means paid work hours an employee is removed from the work site due to a critical incident normally not to exceed forty hours.

<u>Critical Incident Stress Management (CISM)</u> means specially structured meetings between persons directly involved in the critical incident and peer and mental health debriefing leaders. CISM is concerned with the physical, emotional, and psychological reactions of individuals, not

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on the effectiveness of the system response to the incident. CISM must occur prior to the Critical Incident Review (CIR).

<u>Critical Incident Stress Management Team Leader</u> is the person who locates the area to be used for the debriefing(s), coordinates and directs the CISM Team, and develops a specific plan for debriefing.

<u>Critical Incident Trauma</u> is any physical, psychological or emotional reaction to a critical incident or crisis event that hampers one's ability to function.

<u>Defusing</u> is an informal meeting between a trained CISM Team member and affected employee(s) within hours of a critical incident. The purpose is to immediately assess the affected employee(s), provide tips on managing critical incident trauma, and allow employee(s) to talk about the incident.

Mental Health Professional is a licensed clinical social worker, licensed psychologist or other licensed professional counselor who is trained in the Critical Incident Trauma-debriefing model, and who has an understanding of, and experience with, both the role of a corrections employee and the Department.

<u>Peer Supporter</u> is an employee trained to provide peer support in the form of one-on-one discussions, defusing, debriefing and assistance to a mental health professional in conducting a critical incident stress debriefing.

Post Trauma Coordinator is a person trained in Peer Support, assigned by the Warden to coordinate Post Trauma Response.

V. PROCEDURES:

A. <u>General Requirements:</u>

- 1. Services available to persons who have been subject to a critical incident may include but are not limited to the following:
 - a. Support for staff victims and first responders.

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- b. Support for staff families.
- c. Critical Incident Trauma response.
- d. Counseling through Employee Assistance Programs.
- e. Hostage rehabilitation, if applicable.
- f. Assistance with benefit and insurance issues.
- 2. MSP shall maintain an Employee Assistance Program (EAP) to aid employees who experience long-term incident related trauma.
- 3. Evaluation by the employee assistance provider or Department mental health staff, where applicable, will be mandatory for an employee involved in any of the following on-the-job incidents:
 - a. Use of force that results in serious injury/death.
 - b. Witnessing or involvement in any incident where serious injury or death occurs.
 - c. Sexual assault.
 - d. Serious injury due to an offender assault.
 - e. Involvement in a shooting incident.
 - f. Involvement in a hostage situation.
 - g. Other incidents the Warden or designee believes to have a potential for post trauma effects.

B. <u>Activation:</u>

- In the event of a crisis event or critical incident, the Warden or Incident
 Commander must ensure that all involved employees are identified and that they
 attend a mandatory critical incident stress management session.
- 2. The following intervention techniques may be employed, all or in part, in a crisis event or critical incident:
 - a. One-on-one peer support.
 - b. Defusing.
 - c. Critical incident management debriefing.
- 3. If a CISM team is needed the Incident Commander will notify the CISM Team Leader.

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4. The Incident Commander:

- a. Will notify the Post Trauma Coordinator of the event.
- b. May relieve the affected employee(s) from assigned duties as soon as possible utilizing the Critical Incident Furlough. The employee may be assigned to duty status at home or to another work location. If assigned to duty status at home, the employee is required to comply with directions from supervisory staff regarding counseling or other help intervention. The Warden will decide when a Critical Incident Furlough will terminate after consulting with a designated mental health professional.
- c. May assign peer supporter(s) to be with the affected employee(s).
- d. May identify the affected employee(s) for mandatory defusing/debriefing.
- e. May determine the level of services to be activated.
- f. May identify a defusing/debriefing site.

C. Post Trauma Coordinator:

The Warden shall designate a Post Trauma Coordinator who will:

- 1. Provide advice and counsel to the Commander, and assist Post Trauma Services.
- 2. Maintain a peer support recall list of Critical Incident Stress Management trained staff.
- 3. Designate an area for briefings for the families of staff.
- 4. Designate an alternate Post Trauma Coordinator in the event of unavailability.
- 5. Establish contact with the Command Center for briefing, implement the Emergency Post Orders for Post Trauma and arrange for logistical support for families of staff victims/first responders to include:
 - a. Activate the emergency log.
 - b. Identify and assign staff to serve as staff family liaison.
 - c. Identify staff involvement.
 - d. Assign staff to assist with transportation, lodging, child-care and any other special service coordination.
 - e. Assign staff to redirect media inquiries to the Public Information Officer (PIO).
 - f. Activate Critical Incident Stress Management Team members.

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- g. Ensure referral to the Employee Assistance Program (EAP).
- h. Ensure follow-up care is provided as recommended.
- 6. Assist in CISM Team selection.
- 7. Arrange quarterly training for CISM Team members

D. <u>Department Mental Health Professional Involvement:</u>

In preparation for dealing with a crisis event or critical incident, designated mental health professionals will:

- 1. Provide consultation and assistance in the development of the CISM operations.
- 2. Assist in determining CISM Team training needs and developing lesson plans and training modules.
- 3. Maintain a list of mental health referral resources.
- 4. Assist in quality assurance and other documentation useful for CISM research and program evaluation.
- 5. Ensure integrity of patient confidentiality regarding CISM.
- 6. Maintain a current phone list of all Department staff trained in CISM.
- 7. Maintain an on call list of Department Mental Health Professionals.
- 8. Make recommendations to Incident Commanders regarding critical incident furlough issues.

E. <u>On-Site Supervisor/Commander:</u>

In the event of a crisis event or critical incident, the on-site Supervisor/Commander will:

- 1. Whenever possible, remove the involved employee(s) from the area in which the event occurred.
- 2. Notify the Post Trauma Coordinator.

VI. CLOSING:

Questions concerning this policy should be directed to the MSP Post Trauma Coordinator.